PTO/88/06 (12-04)

Approved for use through 7/3 (2006, OMB 0551-0012
U.S. Petent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Peperwark Reduction Act of 1935, no persons are required to respond to a collection of information unless it displays a velid CMB combal number. 10/046,611 PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 OTHER THAN APPLICATION AS FILED - PART I OR SMALL ENTITY SMALL ENTITY (Column 1) (Calumn 2) FOR MUMBER FILED NUMBER EXTRA RATE (\$) FEE (1) RATE (1) FEE (1) 150 375 (37 CFR 1.10(s), (s), or (c)) REARCH FEE DT OFR 1.1601 (), or (m) EXAMINATION FEE G7 CFR 1.15(a), 60, er (88) TOTAL CLAIMS 8 ОЯ minus 20 e (57 CFR 1.10(3) INDEPENDENT CLAIMS pránus 3 = . (37 CFR 1.16(N)) If the specification and drawings exceed 100 sheets of paper, the application size fee due ts \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See APPLICATION SIZE (37 CFR 1.10(1)) :.• 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.18(s). 40 250 MULTIPLE DEPENDENT CLAIM PRESENT (07 CFR 1.180)) 750 TOTAL TOTAL " If the difference in column 1 is less than zoro, writer "O" in column 2. APPLICATION AS AMENDED - PART II OTHER THAN Oft (Column 2) SMALL ENTITY SMALL ENTITY (Cotumn 3) (Column 1) CLAIMS REMAINING HIGHEST NUMBER ADDI-TIONAL PRESENT ADDI-TIONAL RATE (8) RATE (\$) AFTER AMENDMENT PREVIOUSLY **EXTRA** FEE (F) FEE (S) AMENDMENT PAID FOR 20 TOTAL NOT x 25 50 OR- $\mathbf{x} \supset \infty$ DI CHE LINE x /00 . a Application Size Fee (37 CFR 1.19(e)) 180 360 FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (17 OFR 1.16(1)) OR TOTAL TOTAL OR ADD'L FEE ADOL FEE 12/13/67 (Cotumn 2) (Column 1) (Cotuma 3) HIGHEST CLAIMS RATE (1) ADDI-NUMBER PREVIOUSLY PRESENT REMAINING RATE (\$) ADDA ø TRONAL FEE (\$) TIONAL AFTER PAID FOR FEE (\$) ENDMENT COT COTAL LANGE ×25. 50 OR 0 × 200 x100 Application Size Fee (37 CFR 1.16(e)) 360 180 FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (17 CFR 1.16Q) OR . TOTAL ADD'L FEE TOTAL OR ADD'L FEE

" If the entry in column 1 is less than the entry in column 2, write "O" in column 3.

" If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

" If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "2".

The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.

This calleding of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to fife (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Three will vary depending upon the individual case. Any comments on the submitted to use of the Chief Information Officer, U.S. Patient and Tradement Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450.

**THE OFFICE OF THIS ADDRESS. SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandria, VA 22313-1450.